Commonwealth of Kentucky Department for Natural Resources Division of Mine Permits

Application for Water Quality Certification for Surface Coal Mining Activities

The Clean Water Act Section 401 Water Quality Certification (WQC) program in Kentucky ensures that activities which may involve a discharge into waters of the Commonwealth which require federal permit or license are consistent with Kentucky's water quality standards in 401 KAR Chapter 5. The Energy and Environment Cabinet has authorized the Department for Natural Resources to issue water quality certifications related to surface coal mining operations. The project may not start until all necessary approvals are obtained. For questions concerning the WQC process, contact the WQC Coordinator at (502)-564-2320.

1.	Applicant Name: Mailing Address:					
	Contact Person: Telephone No: ()					
	E Mail Address:					
2.	Consultant Name & Address:					
	Telephone No. ()E Mail Address:					
3.	Provide a brief description of the proposed activity and stream impact.					
4.	Project Location Information:					
	County; USGS Quadrangle Name					
	Nearest Community & Road Intersection:					
	Longitude Latitude (Approximate center of the project area)					
5.	List the names of all streams affected by the proposed project:					

	permanent	structure.				
7.	For each affected stream provide the linear feet of impact, whether the impact is temporary or permanent and indicate if the stream reach is classified as ephemeral, intermittent, or perennial.					
		at the nearest i		_	cted: roads, provide directions	
10.		s No			orps of Engineers for this application:	
10.	project? Ye	es No	. If yes, ind NW 21	icate type of _ NW 27		
	project? Ye NW 12 NW 50 Provide the	s No _ NW 14 _ Individual _	. If yes, ind NW 21 Other mit numbers	NW 27	application:NW 49 with this mining activity:	
11.	project? Ye NW 12 NW 50 Provide the SMCRA Pe	s No _ NW 14 _ Individual _ e following per	. If yes, ind NW 21 Other mit numbers, l	icate type of _ NW 27 s associated XPDES No	application:NW 49 with this mining activity:	
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accurate to the best of my belief and knowledge.						
Applicant's Signature:						
	, Date:					
If signed by applicant's agent, attach power of attorney						
SUBMIT APPLICATION AND ATTACHMEN	NTS TO:					

I hereby request approval for construction across or along a stream as described in this application and supporting attachments. All of the information provided with this application is true and

WQC COORDINATOR
DIVISION OF MINE PERMITS
#2 HUDSON HOLLOW
FRANKFORT, KENTUCKY 40601